CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

101	onigie-can			CC3				
1. DATE OF REPORT		ANDIDATE OR (0 1				
JANUARY 29, 2009	Ho	well	\mathcal{N} .	Veoples				
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DATE	Ξ			
				August	3, 200 6			
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code	Phone			
801 Broad St, Suite 200		-08A,	TN	37402	265-0214			
4.b. CANDIDATE'S HOME ADDRESS (if differen Street or Rural Route	t than 4.a.) City	• 1	State	Zip Code				
8010 Snow Hill Bd.	Dalteral		Jal	37363	Phone 2 3 8 - 456 1			
5. OFFICE SOUGHT (include district number, if	f applicable)	6. NAME (OF POLITICAL	TREASURER (may be				
Chancellon, Pants, 11th Jud.	District		AAS A	. Williams	,			
7. CATEGORY OR REPORT (Check one)	П							
FIRST SECOND THIRD	FOURTH	PRE-	PRE-	MID-YEAR	YEAR-END			
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY 8.b. ENDING	DATE OF REPO	SUPPLEMENTAL DRTING PERIOD	SUPPLEMENTAL			
July 1, 2008			NUARRY	15, 2009				
9. (Check one)			,,,,,,,,	10, 200-7				
 a.								
b. This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.								
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.								
11. WITNESS SIGNATURE signature of witness	1/29/09 date		signa	Dafter ture of witness	1/29/09 pate			
12. SUMMARY				1				
a. BALANCE ON HAND LAST REPORT				\$ 3, 848	50			
b. TOTAL RECEIPTS THIS PERIOD				\$	_			
c. TOTAL DISBURSEMENTS THIS PERIOD				\$ 1, 8042	8			
d. BALANCE ON HAND (12.a. plus 12.b. m					-			
e. TOTAL LOANS OUTSTANDING		67 :L WY	OE HAL	5003	so			
f. TOTAL OBLIGATIONS OUTSTANDING				÷.,				
	7.00	- 00 N	OTJIMAH					



SS-1109 (Rev. 2/06)

Page 1 of _____ RDA 1159

4

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In, Full)	14. REPORT COVERING THE PERIOD				
Howell N. Veoples	FROM: 7/1/08	TO: 1/15/09			
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	•				
a. Unitemized Contributions (\$100 or less from each source this period)	_				
b. Itemized Contributions (over \$100 from each source this period)	\$	_			
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		\$			
16. LOANS RECEIVED THIS REPORTING PERIOD	\$				
17. INTEREST RECEIVED THIS REPORTING PERIOD		\$			
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$				
DISBURSEMENTS					
19. EXPENDITURES (other than loan payments)					
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.	g., printing, postage,	gasoline)			
\$					
<u> </u>					
<u> </u>					
\$					
\$					
\$					
\$					
\$					
\$					
Total of Expenditures (\$100 or less each payee)		-			
b. Itemized Expenditures (Over \$100 each payee this period)					
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)					
20. LOAN REPAYMENTS MADE THIS PERIOD	\$				
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)					
22.IN-KIND CONTRIBUTIONS					
a. Unitemized in-kind contributions (\$100 or less from each source this period)	-				
b. Itemized in-kind contributions (over \$100 from each source this period)\$					
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$					
23. OBLIGATIONS					
a. Unitemized Obligations Outstanding (\$100 or less each)\$\$					
o. Itemized Obligations Outstanding (Over \$100 each)\$					
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$					



SS-1133 (Rev. 4/02)

Page _____ of ______

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVER FROM 7/1/08					TO: 1/15/09		
	Amount						
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)							
First Name Howell	Middle Name		Purpose of Expenditure RGimburse Air FARE		Amount of Expenditure		
Last Name/Business Name VeoDes		Purpose of Expenditure REINDURSE AIR FARE (548.50), lodging (850.65) AND RUMMAN (HOS.13) for Continuing legal Education Seminar		1,80428			
Address				.,			
City	State	Zip Code	EVACATION SEMINAR				
First Name	Middle Nam	ne	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name Middle Name		Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name							
Address							
City	State	Zip Code					
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must	1,80428						